

**SCOUT OUTING PERMISSION SLIP (2008 Crossover Scout)**

Scout's Name: \_\_\_\_\_ In case of Emergency, Please contact:  
Scout's Rank: \_\_\_\_\_ Name: \_\_\_\_\_  
Birthdate: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Home Address: \_\_\_\_\_ Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Work Phone: \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Mobile Phone: \_\_\_\_\_

\*\*\*\*\*

I give permission for my child, \_\_\_\_\_, to participate in the "Outings" of BSA Troop 197 of Atlanta, GA described below and any activities associated with or related to the Outings. My child has no physical problems, limitations or allergic reactions (except those listed below), of which the adult leaders ("Adult Leaders") should be aware in terms of my child's participation in the Troop's Outings.

Listed below are any physical limitations, medical needs (please refer to attachment for Atlanta Area Council Medication Dispensing Policy), and/or allergic reactions:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I have been previously informed about the Outings, and I hereby assume all risks and hazards of and incidental to the Outings, including, but not limited to any transportation to and from the Outings, other than proven negligence or proven willful misconduct. I hereby release and agree to indemnify and hold harmless BSA troop 197 and any person or entity associated with the Outings, from and against any and all claims, liabilities, suits, proceedings, actions, causes of action, damages, costs and expenses arising out of or related in any way to my child's participating in the Outings, other than those arising out of proven negligence or proven willful misconduct.

In the event I cannot be reached in an emergency, I hereby give my permission to the physician selected by any of the Adult Leaders to hospitalize, provide medical aid, secure proper anesthesia or to order injection or surgery as may be reasonably necessary for my child.

Insurance Co.: \_\_\_\_\_ Policy ID No.: \_\_\_\_\_

Signature of Parent or Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

September 21-23	Chattooga River	Whitewater Rafting
October 12 - 14	TBD	Backpack Hiking
November 16-18	Sand Mountain, AL	Rock climbing
January 18-21	Okefenokee Swamp	Canoeing. <u>Families invited</u>
Feb 29 - Mar 2	Bert Adams Camp	Camporee
March 28-30	Silver Comet Trail	Biking
April 18 - 20	Standing Indian, NC	Backpack Hiking /Dayhike
May 9-11	Camp Hiawassee	Service Project

Summer Camp: Camp Rainey Mtn: June 8 - 14; Camp Woodruff: July 6 -12.